

Create\Update a Facility\Home – Job Aid

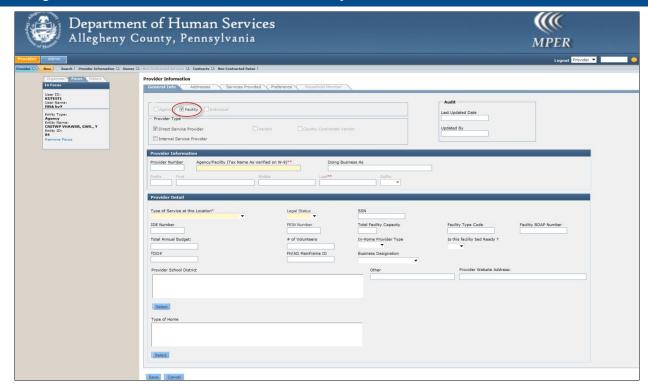
Facilities\Homes are created in MPER. The Provider record is comprehensive and requires to have detailed information documented.

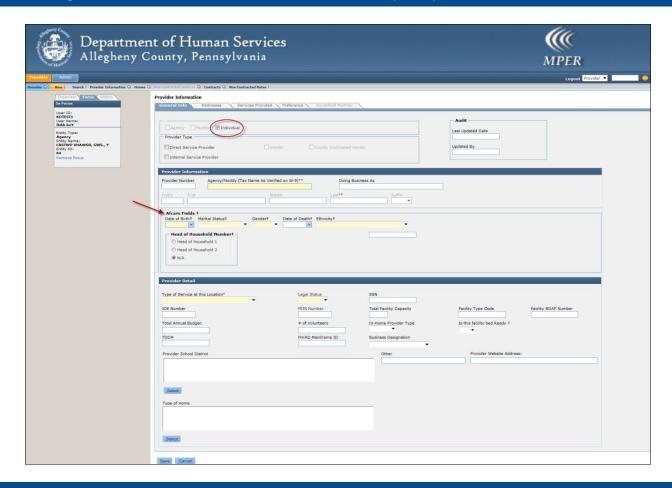
Accessing Provider Information screen

If Provider is either 'Facility' or 'Individual' AND Provider Type is either 'Direct Service Provider' or 'Internal Service Provider' AND the Type of Service at this Location 'Both', 'Placement', 'Placement & In-Home'. 'Placement & Prevention/Diversion' or 'Placement, In-Home, & Prevention/Diversion', the Type of Home becomes a required field.

- 1. Logging into the application brings your Agency into focus.
 - a. To bring an existing Facility into focus, click My Facilities in the left navigation bar.
 - i. From the *List of Facilities*, select the Facility of interest and click the **[Show]** button.
 - b. To create a new facility, navigate to a new Provider Information screen.
 - i. Provider > New
- 2. Complete the required and applicable fields in all sections and tabs.
- 3. Click the **[Save]** button to save the entries.
 - i. TIP: The created entity appears in focus when saved.

Accessing the Provider Information screen - New Facility





Completing the Provider Information screen - General Info tab

General information section

- 1. Check Facility or Individual.
- 2. Check the Provider Type.
 - TIP: The combination of these two checkboxes enables the remainder of the screen.

Provider Information section

Complete the known information for the fields in this section.

AFCARS Fields section

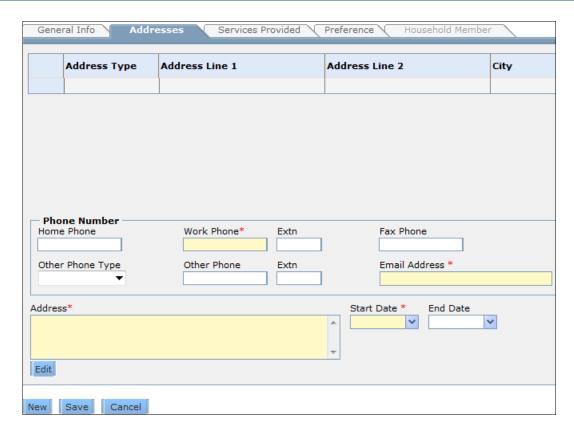
- i. TIP: This section is enabled only when Individual is selected.
- 1. Select the Date of Birth, Marital Status and Gender.
- 2. Select the *Date of Death*, if applicable.
- 3. Select Ethnicity.
- 4. Select a radio button for *Head of Household 1, Head of Household 2* or *N/A*. You can only choose one option.

Provider Detail section

- 1. Select the Type of Service at this Location.
- 2. Select the Legal Status of the provider.
- 3. Enter the SSN (Social Security Number).
- 4. Enter the JDE Number and FEIN Number.
- 5. Enter the Total Facility Capacity, Facility Type Code and Facility BDAP Number.
- 6. Enter the Total Annual Budget.
 - i. TIP: This field allows numbers only.

- 7. Enter the # of Volunteers.
- 8. Select the *In-Home Provider Type*.
- 9. Select Is this facility bed Ready?
- 10. Enter the TDD# and FH/AD Mainframe ID.
- 11. Select the Business Designation.
- 12. To enter *Provider School District* information, click **[Select]** under the *Provider School District* box. Highlight all that apply, click **[>>]** and click **[OK]**. If *Other* is selected, the *Other* field is enabled.
- 13. Enter the Provider Website Address.
- 14. To enter *Type of Home* information, click **[Select]** under the *Type of Home* box. Highlight all that apply, click **[>>]** and click **[OK]**.
 - i. TIP: If Foster Care, Group Home, Residential or Shelter is selected, the Total Facility Capacity and Provider School District become required fields.
 - ii. TIP: The information on the Address tab must be completed before this screen can be saved.

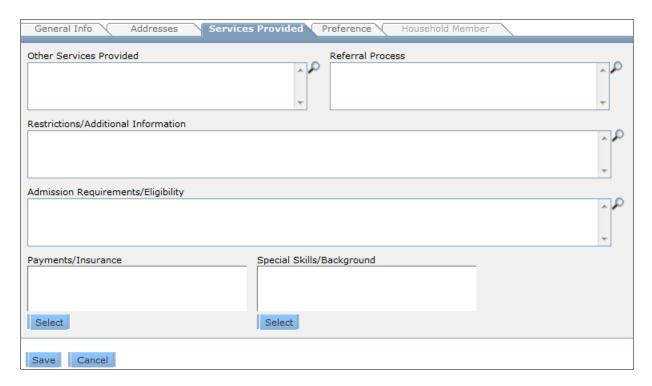
Completing the Provider Information screen - Addresses tab



- 1. Enter the Home Phone, Work Phone numbers and Extn.
- 2. Enter the Fax Number.
- 3. Select Other Phone Type. Enter the Other Phone number and Extn.
- 4. Enter an Email Address.
- 5. Click the **[Edit]** button to enter an address record.
 - i. TIP: To add an address, click [Edit] beneath the Address field. Select the type of address and information and click [Search]. The application verifies the address entered with Postal records to show possible alternatives. Select the correct address and click [OK]. If correct address does not appear as an option, select the box next to Save Without Verification and click [OK].
- 6. Enter a Start Date. This is the date the facility occupied the address.
- 7. Click the **[Save]** button to save the screen.
 - i. TIP: One Local Address type must be added to save this screen.

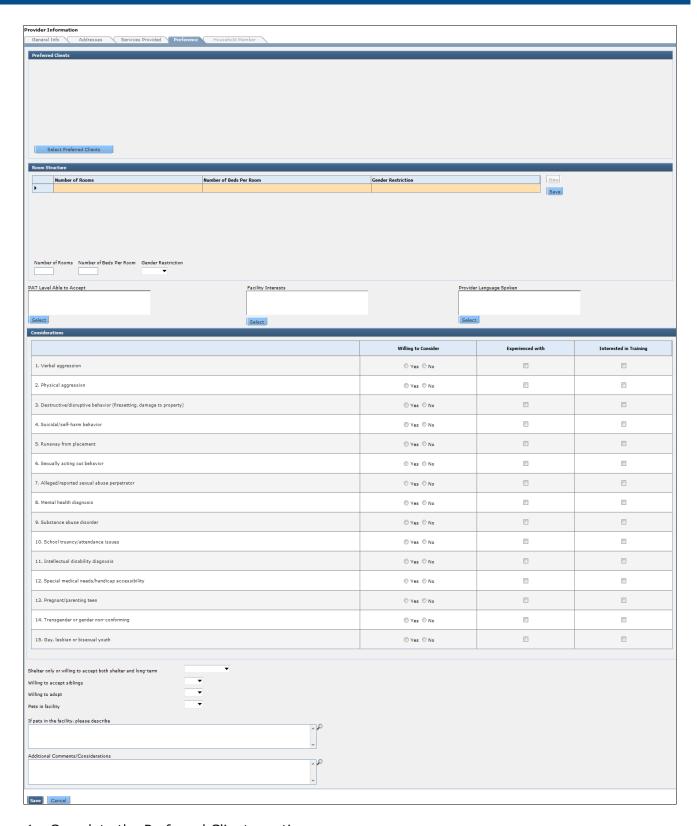
NOTE: The first time a provider record is saved, the application searches to determine if this provider record exists for your agency. Any potential matches are displayed in a Search Results pop-up. Click the **[Select]** button located in the same section as the provider record you wish to select.

Completing the Provider Information screen – Services Provided tab



- 1. Enter a description for *Other Services Provided, Referral Process, Restrictions/Additional Information* and *Admission Requirements/Eligibility*.
- 2. To enter *Payment/Insurance* information, click **[Select]** under the *Payment/Insurance* box. Highlight all that apply, click **[>>]** and click **[OK]**.
- 3. To enter *Special Skills/Background* information, click **[Select]** under the *Special Skills/Background* box. Highlight all that apply, click **[>>]** and click **[OK]**.
- 4. Click the [Save] button to save entries.

Completing the Provider Information screen - Preferences tab



- 1. Complete the Preferred Clients section
 - a. Select the **[Select Provider Clients]** button. Complete the *Approved Number of Children* pop-up.
 - i. Select the Gender.
 - ii. Enter the *Number Preferred*, the *Yrs.* and *Mnth.* of *Ages Accepted From* and *Ages Accepted To*.

NOTE: Enter the number of children the facility would want to host by age and gender of preference. Multiple entries should only be created if preferences differ by gender or age.

- iii. Click [Save]. On first entry, answers populate in the grid.
- iv. On subsequent entries, click **[New]**. Complete the fields and lick **[Save]** to create a new entry in the grid.
- v. Click **[OK]** to close the pop-up.
- 2. Complete the Room Structure section
 - a. Enter the Number of Rooms and Number of Beds Per Room.
 - b. Select the Gender Restriction.

NOTE: If there are multiple rooms with different numbers of beds or gender restrictions, please have an entry for every room. If the room structure is the same (e.g., 2 rooms with 2 beds that can take either boys or girls), you only need one entry.

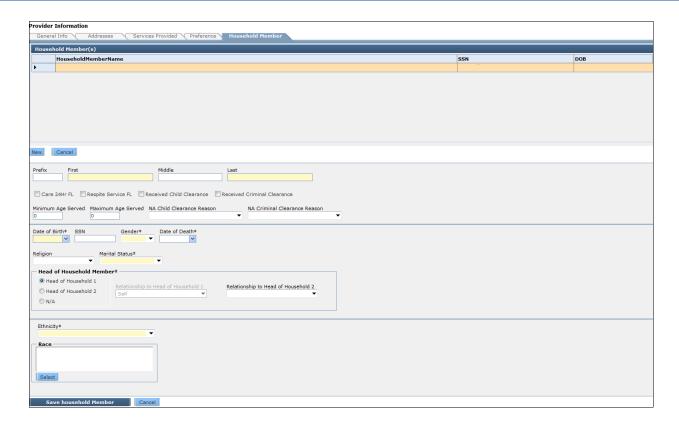
- c. To enter *PAT Level Able to Accept* information, click **[Select]** under the *PAT Level Able to Accept* box. Highlight all that apply, click **[>>]** and click **[OK]**.
- d. To enter *Facility Interests* information, click **[Select]** under the *Facility Interests* box. Highlight all that apply, click **[>>]** and click **[OK]**.
- e. To enter *Provider Language Spoken* information, click **[Select]** under the *Provider Language Spoken* box. Highlight all that apply, click **[>>]** and click **[OK]**.

	Willing to Consider	Experienced with	Interested in Training
1. Verbal aggression			
2. Physical aggression			
3. Destructive/disruptive behavior (firesetting, damage to property)			
4. Suicidal/self-harm behavior	◯ Yes ◯ No		
5. Runaway from placement	◯ Yes ◯ No		
6. Sexually acting out behavior	◯ Yes ◯ No		
7. Alleged/reported sexual abuse perpetrator			
8. Mental health diagnosis	◯ Yes ◯ No		
9. Substance abuse disorder	◯ Yes ◯ No		
10. School truancy/attendance issues	◯ Yes ◯ No		
11. Intellectual disability diagnosis	◯ Yes ◯ No		
12. Special medical needs/handicap accessibility	◯ Yes ◯ No		
13. Pregnant/parenting teen	◯ Yes ◯ No		
14. Transgender or gender non-conforming	◯ Yes ◯ No		
15. Gay, lesbian or bisexual youth	© Yes ◎ No		

3. Complete the Considerations section

- a. For items 1-15:
 - i. Click Yes or No in the Willing to Consider column.
 - ii. If applicable, check the box for Experienced with and Interested in Training.
- b. Select Shelter only or willing to accept both shelter and long-term.
- c. Select Willingness to accept siblings.
- d. Select Willing to adopt.
- e. Select *Pets in the facility*. If *Yes,* complete the *If pets in the facility, please describe* narrative field.
- f. Enter notes in the Additional Comments/Considerations field.

Completing the Provider Information screen – Household Member tab



- i. TIP: The Houshold Member screen is only enabled for Individual providers.
- 1. To create a new household member, click the **[New]** button.
 - a. To edit an existing household member, highlight the household member from the *Householder Member(s)* grid.
- 2. Enter the name in the *Prefix*, *First*, *Middle* and *Last* fields.
- 3. Check the applicable box for Care 25Hr FL, Respite Service FL, Received Child Clearance and Received Criminal Clearance.
- 4. Enter Minimum Age Served and Maximum Age Served.
- 5. Select the NA Child Clearance Reason.
- 6. Select the NA Criminal Clearance Reason.
- 7. Select the Date of Birth.
- 8. Enter the SSN (Social Security Number).
- 9. Enter the Gender.
- 10. Select the Date of Death, if applicable.
- 11. Select the religion and Marital Status.
- 12. Select a radio button for *Head of Household 1, Head of Household 2* or *N/A*. You can only choose one option.
 - i. TIP: If the Household Member is indicated to be HOH 1, then the relationship to HOH 2 is selected. The Relationship to HOH 1 defaults to 'Self'.
- 13. Select the *Ethnicity*.
- 14. To enter the *Race* information, click **[Select]** under the *Race* box. Highlight all that apply, click **[>>]** and click **[OK]**.
- 15. Click the [Save Household Member] at the bottom of the screen.

For more information...

For more information on this communication or for assistance, please be sure to contact the Help Desk at Helpdesk-dhs@alleghenycounty.us or 412-350-4357 Option 2.